SMOKER SURVEY (for smokers age 21 and over)

Please complete the following information and return with your order form.

1. What is your regular brand of cigarettes–that is, the brand you smoke most often?

   _____
   [brand name]

2. Is your regular brand...? (Check one.)
   ☐ Regular/King Size, ☐ 100's or ☐ 120's

3. Is your regular brand...? (Check one.)
   ☐ Menthol or ☐ Non-Menthol

4. Is your regular brand...? (Check one.)
   ☐ Filter or ☐ Non-Filter

5. Is your regular brand...? (Check one.)
   ☐ Lowest/1 mg. tar ☐ Ultra/Extra Low Tc
   ☐ Light/Mild ☐ Medium ☐ Full Flavor

6. Do you usually buy it by the...?
   ☐ Pack ☐ Carton ☐ Both Ways

7. What, if any, was your previous brand?

   _____
   [brand name]

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8. Which of the following best describes you? (Check one in each column.)

☐ African-American	☐ Professional
☐ American Indian	☐ Self-employed
☐ Asian	☐ Homemaker
☐ Caucasian	☐ Skilled Labor
☐ Hispanic	☐ Civil Service
☐ _____	☐ _____

9. How many packs of cigarettes did you smoke in the past month? (Note: 1 carton = 10 packs)

   Total # Packs _____

10. Of these total packs, how many were your regular brand and how many were other brands?

    Regular Brand # Packs _____

    Other _____ # Packs _____
    [brand name]

    Other _____ # Packs _____
    [brand name]

☐ Please remove my name from the Marlboro mailing list.

By responding to the above survey and signing below, I certify that I am a cigarette smoker 21 years of age or older. I am also willing to receive free samples of cigarettes and incentive items in the mail, subject to applicable state and federal law.

Signature _____ [Required] Date of Birth ____/____/____ [Required]

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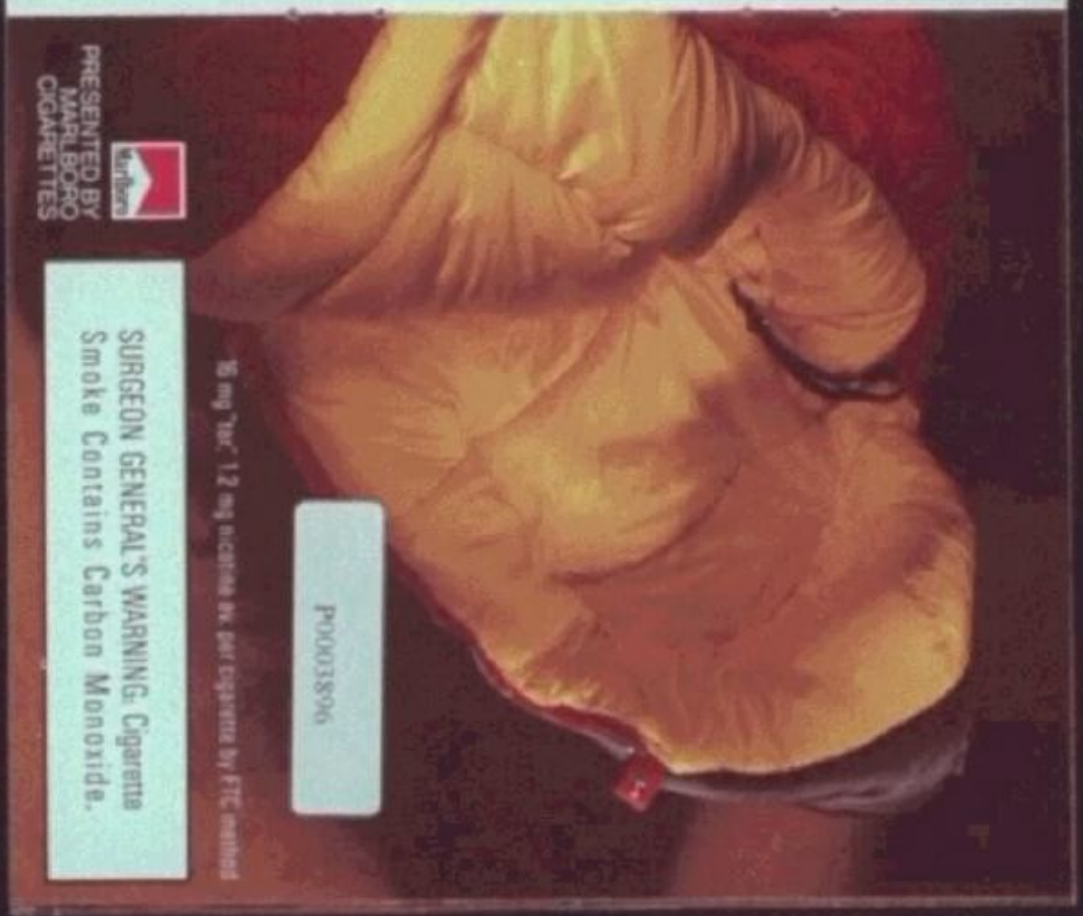

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